

PART B - FEE(S) TRANSMITTAL

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01/04/2008

KLARQUIST SPARKMAN, LLP 121 S.W. SALMON STREET **SUITE #1600** PORTLAND, OR 97204-2988 04/08/2008 SDIRETA2 00000034 10528310

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| Wayne W. Rupert | (Depoxitor's name) |
|-----------------|--------------------|
| Noma L Ourest | (Signature) |
| april 3, 2068 | (Date) |
| upm 7,2008 | \P- |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/528,310 | 03/17/2005 | Edward H Oldfield | 4239-66640-05 | 7600 |

TITLE OF INVENTION: METHOD FOR CONVECTION ENHANCED DELIVERY OF THERAPEUTIC AGENTS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE | |
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| nonprovisional | NO | \$1440 | \$300 | \$0 44/08/200 | \$1740 B SDENBOB4 0000001 | 04/04/2008 | |
| EXAN | 11NER | ART UNIT | CLASS-SUBCLASS | 01 FC:1501 | S ONCUPORT GOODSOI | | |
| CARLSON | , KAREN C | 1656 | 514-012000 | 02 FC:1504 | | 1440.00 OP 300.00 ND | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | 12.05 SP t Sparkman, LLP | | |
| | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| 3. ASSIGNEE NAME A | 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | |
| PLEASE NOTE: Un recordation as set fort | PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | |
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| as represented by | of the United States of Ame the Secretary of the alth and Human Services | erica | Rockville, | Maryland | | | |
| Please check the appropr | iate assignee category of | categories (will not be pr | rinted on the patent): | Individual Corporation | on or other private group | entity Government | |
| Advance Order - | No small entity discount p | permitted) 4550 | D. Payment of Fee(s): (Plea A check is enclosed. Payment by credit care The Director is hereby overpayment, to Deposit | | • • | • | |
| 5. Change in Entity Sta a. Applicant claim | tus (from status indicate s SMALL ENTITY state | • | ☐ b. Applicant is no long | ger claiming SMALL ENT | TTY status. Sœ 37 CFR | 1.27(g)(2). | |
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| Authorized Signature | Mysels | Misex | | Date April | 7 3, 2008 | | |
| Typed or printed nam | e Wayne W. | Rupert | ······································ | Registration No. | 34,420 | | |
| This callestion of info | | TID 1 2 1 1 (77) | | | | ····· | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Attorney Reference Number 4239-66640-05

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

n re application of: Edward H. Oldfield et al.

Application No.: 10/528,310

Filed: March 17, 2005 Confirmation No.: 7600

METHOD FOR CONVECTION

ENHANCED DELIVERY OF THERAPEUTIC AGENTS

Examiner: Karen c. Carlson

Art Unit: 1656

0 7 2008

Attorney Reference No.: 4239-66640-05

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Attorney or Agent for Applicant(s)

Date Mailed _ April 3, 2008

TRANSMITTAL LETTER

Enclosed for filing in the above-referenced application are the following:

- X In connection with issuance of a patent:
 - \bowtie Form PTOL-85b
- Advance order of 4 copies (Fee \$3.00 each = \$12.00)
- Issue Fee (\$1,440.00.00)
- Publication Fee (\$300.00)
- A check in the amount of \$1,752.00 to cover the above-listed fee(s) is enclosed.
- The Director is hereby authorized to charge any additional fees that may be required in connection with issuance of a patent, or credit over-payment, to Account No. 02-4550. A copy of this sheet is enclosed.
- X Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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By

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cc:

Docketing